

30974 U.S. PRO

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 8 | 7-16-01 |
| FORMALITY REVIEW | AT | SC 900 | 08/20/01 |
| RESPONSE FORMALITY REVIEW | ST | 1021 | 11/13/01 |
| | A.T | 1071 | 01/22/02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
..... Allowed I Interference
- (Through numeral)..... Canceled A Appeal
+ Restricted O Objected

| Claim | | Date | |
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| Final | Original | | |
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| Claim | | Date | |
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| Claim | | Date | |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

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08/20
858
01/22/02